



IAPO4Rec'd PCT 08 SEP 2008  
Atty. Dkt. No. 082671-0228

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Michael SWAB  
Title: A FEEDER CART USED TO INTEGRATE  
FEEDER MECHANISMS AND SURFACE  
MOUNT MACHINES OF VARYING TYPES  
Appl. No.: 10/537,990  
International Filing Date: 12/08/2003  
371(c) Date: 06/16/2006  
Examiner: David Patrick Angwin  
Art Unit: 3729  
Confirmation Number: 1372

**AMENDMENT TRANSMITTAL**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

[ X ] The fee required for additional claims is calculated below:

	Claims As Amended		Previously Paid For		Extra Claims Present		Rate		Additional Claims Fee
Total Claims:	26	-	23	=	3	x	\$50.00	=	\$150.00
Independent Claims:	3	-	3	=	0	x	\$210.00	=	\$0.00
First presentation of any Multiple Dependent Claims:						+	\$370.00	=	\$0.00

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CLAIMS FEE TOTAL = \$150.00

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☒ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

<input type="checkbox"/> Extension for response filed within the first month:	\$120.00	\$0.00
<input checked="" type="checkbox"/> Extension for response filed within the second month:	\$460.00	\$460.00
<input type="checkbox"/> Extension for response filed within the third month:	\$1,050.00	\$0.00
<input type="checkbox"/> Extension for response filed within the fourth month:	\$1,640.00	\$0.00
<input type="checkbox"/> Extension for response filed within the fifth month:	\$2,230.00	\$0.00
EXTENSION FEE TOTAL:		\$460.00
<input type="checkbox"/> Statutory Disclaimer Fee under 37 C.F.R. 1.20(d):	\$130.00	\$0.00
CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL:		\$610.00
<input type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):		\$0.00
Extension Fees Previously Paid:		\$0.00
<b>TOTAL FEE:</b>		<b>\$610.00</b>

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A credit card payment form in the amount of \$610.00 is enclosed. The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date September 8, 2008

By Jessica M. Cahill

FOLEY & LARDNER LLP  
Customer Number: 22428  
Telephone: (202) 295-4776  
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Jessica M. Cahill  
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